





Captain James J. Ware USNS Comfort MTF, Commanding Officer



Overall Classification: UNCLAS/FOUO





OPERATION UNIFIED RESPONSE



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Mission Summary



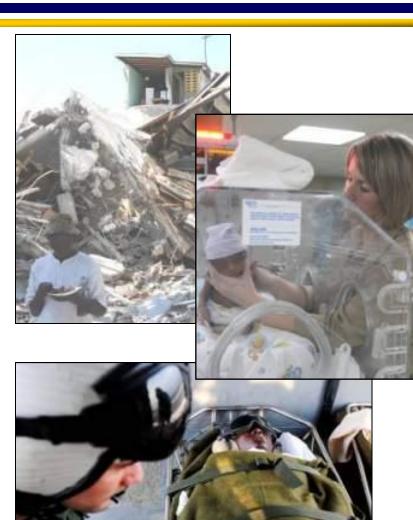




Executive Summary



- 7.0 magnitude earthquake on 12 Jan 2010 caused historic devastation to the country of Haiti
 - Estimated 230,000 Haitians killed
 - Government of Haiti was in a state of emergency
 - Ministry of Health infrastructure was incapacitated
- TG 41.8 was formed on 20 Jan and quickly become a focal point for critical triage and medical regulation for JTF-Haiti
 - COMFORT received first patient 7 days after earthquake
 - Nearly 200 patients admitted within first 40 hours on station
 - Operated as a joint military, inter-agency and NGO medical response Task Group





AGENDA



- Executive Summary
- International Response
- Lines of Operations
- USNS COMFORT Medical Focus
 - Medical Assessment / Statistics
 - Navy Staff /NGO Augmentation
 - Medical Capabilities/ Operations Focus/Lines of Communication/ Transportation Resources
 - Medical Logistics
 - Medical Supply Procurement
 - Equipment Repair/Procurement
 - Blood Supply
 - Orthopedic Support













USNS COMFORT Activation as of 1100 EST 13 January, 2010



7AH 20			V
		1/77 01/0771/0	

	HOSPITALMTF SYSTEMS	
Activation Order	USFF1100 EST 13 January, 2010	
ANGIO Suit installation	Structural work in progress. Install date sched for Feb 2010. Not Mission Critical (NMC)	Action required
MTF Facilities that are disabled	Disabled- H20, power, etc. awaiting restoration of steam & water by ENG staff	Action required
MTF infrastructure	3 of 11 blood bank freezers OOC due to electrical ground issues.	Action required
Network IATO/ATO	NIPR/SIPR Accreditation needed & UPs replacement	Action required
WSC-8	SHF- slow connectivity max 768	Action

Manning HA/DR TO – awaiting info from FFC required Action

required



COMSC NOOM T-AH MISSION PREPARATION



				MTFSYST	EMS				
	Manpower ID		MTF, NGOs, Develop TO	Military Dets (CDR Sta	ff, Security, I	Helo, PAO, Partne	er Nations, etc),	•
	Logistics		85% AMAL/S	Stock, Mission specific	medical iten	ns			•
	Food Service		Provisions of	on load					•
	Galley/Equipme	ent	Galley Equip	oment, Ovens, Chill Box	ς, Refrigerati	on			•
	Ship's Store		Emblematic	s, Health and Comfort I	tems				•
	Disbursing		Full Disbursi	ng Operations, Safes					•
	Postal		Postage Met	er, Stamps					•
	Laundry and Se	elf Serve Laundry	Equipment S	Status, Supplies					•
	Operations		O2N2, Flt De	ck, Radio					•
	Comms			WSC-8, Non-Classified ones, Iridium Phones a		GANS, Hand Held	Radios, PAO	Suite,	•
	Mission Fundin	ıg	Guidance, L	ine of accounting, Adva	nce receipt	(120-day pre dep	loyment)		•
	Network		IATO/ATO/W	SC-8					•
	MTF Facilities		O2N2 Plant,	Steam, Power, H2O, Re	efers, Freez	ers, Plumbing, T-	ALTS Comple	ted	•
	Training		Ship Board Orientation, Fire Fighting, Life Raft Commander						
	MTF Medical IT	Systems	CHCS, Tele-	Medicine, DMLSS, SNA	P				•
	Medical Equipn	nent/Supplies	CT, Radiolog	gy, Lab, Blood/Blood P	roducts				•
	•	On-track	<u> </u>	Issue(s) requires resolution	•	Off-Track not recoverable	(A)	Action re	quired
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International Medical Response



International Medical Forces Afloat:

SPS CASTILLA
ITN CAVOUR
FRS SIROCCO
ARM HUASTECO
ARM TARRASCO
ARM PAPALOAPAN
ARC BUENAVENTURA
ARC CARTAGENA DE INDIAS

Initial Responders:

USS NORMANDY
USS UNDERWOOD
USCG LARAMIE
USCG LEGARE
USCG OAK
USCG VALIANT
USCG HAMILTON
USCG TAHOMA
USCG DEPENDABLE

GoH / NGO / OGO Medical Forces Ashore:

Ministry of Health
United Nations
USAID
International Red Cross
World Health Organization
Partners in Health

US JOINT FORCES AFLOAT

Medical Forces Ashore: +USNS | +USNS | USS N

Canadian Field Hospital
China- Medical Rescue Team
Chile-Portable Hospitals
Japan- Medical team
Jordan - Field Hospital
Israel- Field Hospital
Spain- Medical Team

Russia-Mobile Hospital
Brazil-Field Hospital
Turkey-Field Hospital
France-Field Hospital
Venezuela-Medical Team
Cuba-Medical Team
Italy-Medical Team

+USNS COMFORT+

USS NASSAU ARG USS CARL VINSON USS BATAAN ARG

COMFORT

US Joint
Medical Forces Ashore:

EMEDS SPEARR 22 MEU 24 MEU JTE-B

Medical response was a Joint, Inter-agency, Civilian and International effort supporting

Government of Haiti

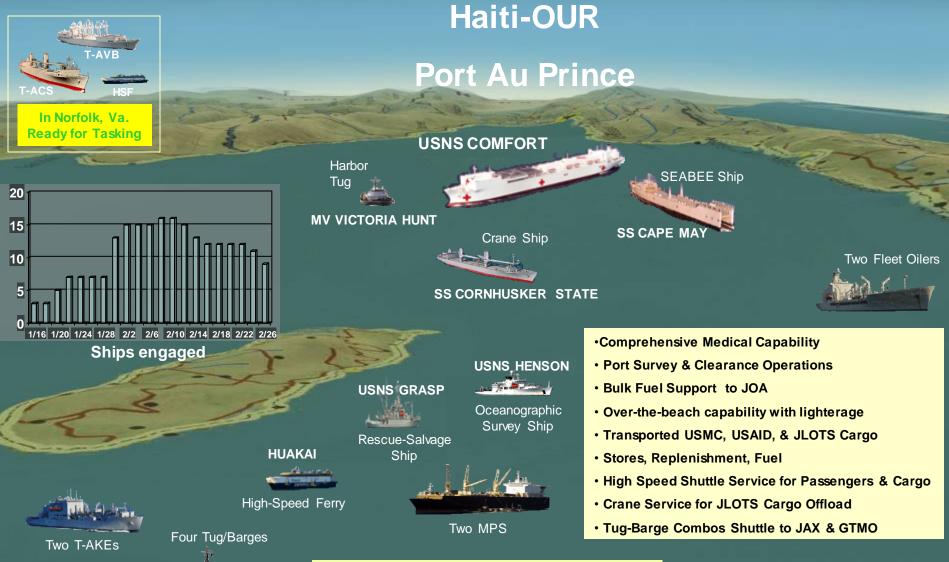


Not to Scale

Military Sealift Commana UNCLAS//FOUO

Provided a Wide Range of Capabilities





MSC Enables Joint Sea-Base

United States Naval Forces Southern Command



Lines of Operations

MoH Support



Operations

Security

Transportation

Medical

Personnel

Supply Mgmt

Knowledge Mgmt











- 104: Highest number of admissions in one day
- 931 surgical procedures performed
 - 16 Craniotomy
 - 44 Spinal
 - 33 Pelvis
 - 676 Extremity
 - 122 Femur Fracture surgeries

16 medical site surveys and 26 LZ surveys

 15 medical site visits for follow-up and post-operative care

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United States Naval Forces Southern Command



Operations



- Task Group provided critical linkage between the medical operations and the overall joint mission
- Operations center balanced mission requirements and the transport of critical patients in a highly dynamic environment
- Planning cells produced numerous COA and CONOPS supporting daily mission requirements and tasking
 - Medical site surveys
 - HLZ surveys
 - Redeployment planning
 - Patient movement
- Embedding LNOs in critical areas was key to coordination between task group assets





Theater Security Cooperation



- Helo Operations Conducted with Partner Nations
 - Canadian GRIFFON
 - French PUMA
- DV Visits
 - Colombian Field Medical Team
 - Canadian Surgeon General
 - Haitian Minister of Health
 - French ship FRS SIROCCO
- Cross Deck Visit/Surgery
 - Italian ship ITS CAVOUR



"The U.S. answered the call very early. The U.S. came to help us and we don't know how to really thank you."

-Dr. Alex Larsen
Minister of Health-Haiti





COMFORT Medical Capabilities First 36 Hours



- Deployed with standard Humanitarian Civil Assistance (HCA) mission capabilities.
 - Utilized Continuing Promise model
- Surgery
 - Deployed with 1 orthopedic surgeon
 - Performed 36 straight hours of lifesaving surgery on first day of patient admissions
- Medical Staff
 - Broad range of specialties based on HCA missions vice critical mass casualty response
- Nursing Services
 - Wards staffed for 250 beds
 - Filled 411 beds with critical care patients



Develop JMD tailored to provide medical capabilities for disaster response missions



USNS COMFORT PERSONNEL

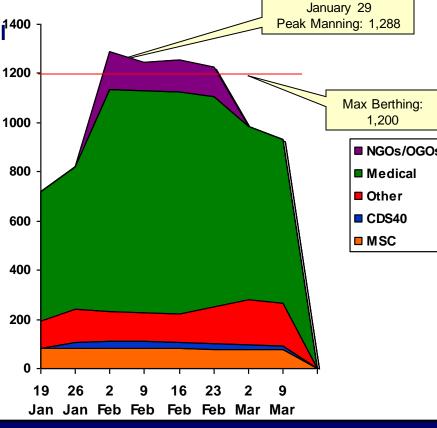


- Joint Effort US Military/Civilian, AD/Reserves, NGO's, American Red Cross
- "Right Sized" Medical Staff Based on Need
 - Synchronized Medical Capacity with Medical Mission Requirements
 - Translators a Critical Mission Element
 - Berthing Limitations a Major Constraint
 - Need to Plan for Patient Escorts Bed Space





USNS COMFORT MANNING



Tailored the Manpower Requirements to Maximize Medical Capabilities Needed for Earthquake Injuries

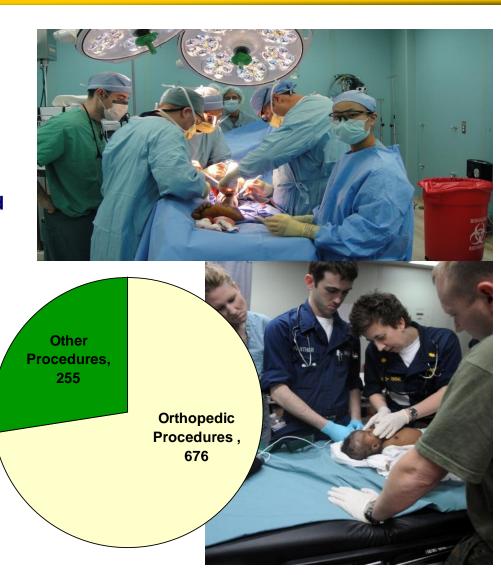


MEDICAL CAPABILITIES 2nd wave of medical augmentees



Surgical Capabilities

- Orthopedics, Neuro-Surgery, ENT, Plastic, Burn, Dermatology, Urology, Obstetrics, Maxillofacial, Oral Dentistry, Wound Care
- 7 OR's 12 hours/day
- 3 OR's 24 hours/day
- 820 Surgeries (931 Procedures) Performed
- Medicine Capabilities
 - Cardiology, Nephrology, Infectious
 Disease, Neurology, Internal Medicine
 Pediatrics, Respiratory Therapy, Physical
 Therapy
- Equipment Capabilities
 - CT, Dialysis, C-Arms, Fluoro, Specialized
 Diagnostic Capabilities in Clinical Lab
- Bed Capacity
 - 1,000 Beds on Paper
 - Limited by Complexity of Patient Injuries and Patient Escort Requirements





NGO/OGO Medical Augmentation



- 246 Volunteers from 9 Organizations
- Alleviated high patient/provider ratios
- Orthopedic Trauma Association (OTA)
 - 25 member team cleared backlog of 120 orthopedic cases within 4 days
- National Nurses United (RNRN) augmented nursing staff throughout the MTF
 - Patient discharge planning with Project Hope, ensuring patients transferred to proper facilities
- American Red Cross translators facilitated provider/patient interaction
 - Allowed patients to make informed decisions in hospital therapy and follow-on treatment
- Coordinated with US Dept of Health, USAID and other OGOs



- American College of Surgeons
- American Red Cross
- Johns Hopkins
- National Nurses United
- Operation Smile
- Orthopedic Trauma Association
- Project Hope
- University of Michigan
- UCLA
- USAID

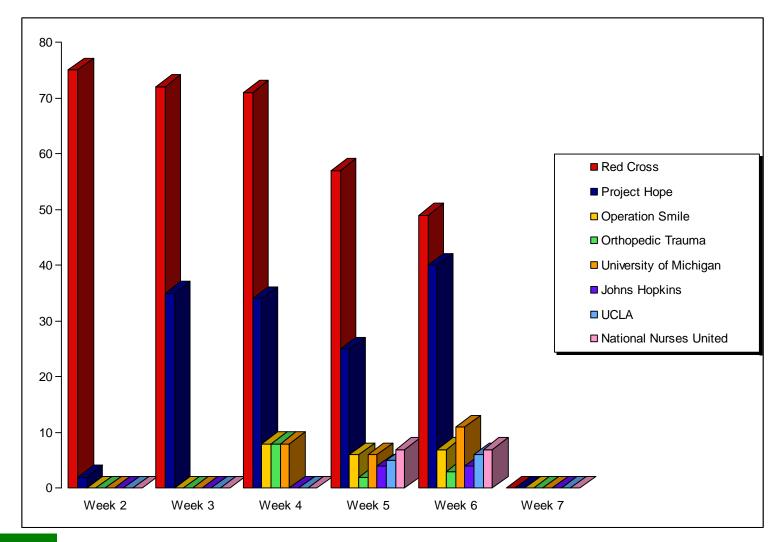


NGO partnerships filled critical gaps in specific medical and translation skills



NGOs



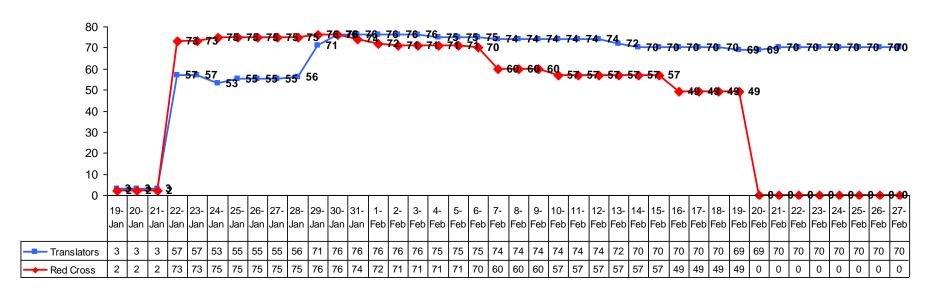






AMERICAN RED CROSS TRANSLATORS --104 VOLUNTEERSUS NAVY TRANSLATORS --66 FROM THOUGHOUT THE NAVY

Interpreter Census On Board USNS COMFORT (T-AH 20) Operation Unified Response Haiti





MEDICAL OPERATIONS FOCUS



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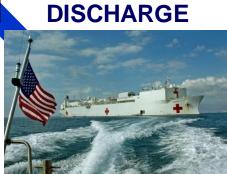
TREAT



TRANSPORT



COMPASSION







AFTERCARE

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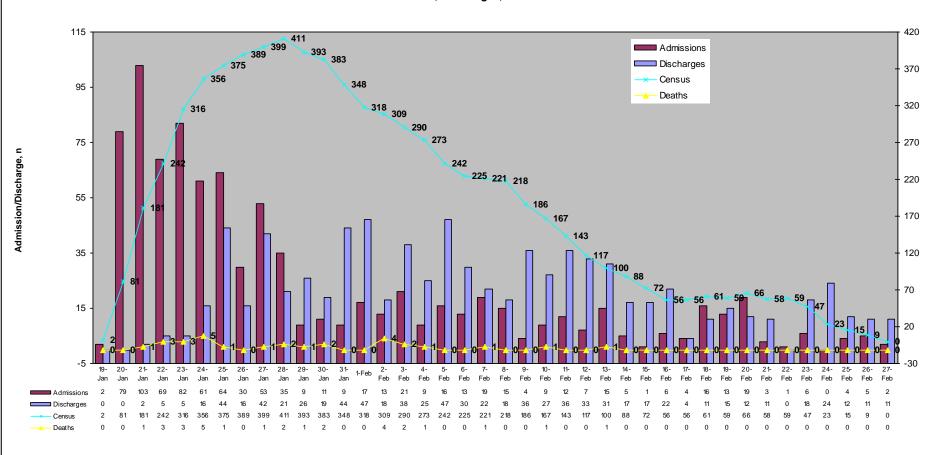
United States Naval Forces Southern Command



Admissions, discharges, deaths



USNS Comfort Opereration Unified Response Haiti Patient Admissions, Discharges, Deaths 19 Jan - 3 Mar

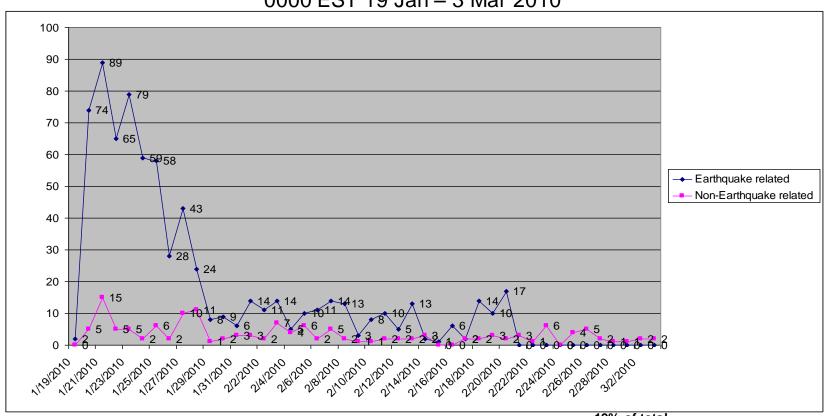




EARTHQUAKE & NON EARTHQUAKE RELATED CASES



0000 EST 19 Jan - 3 Mar 2010



N=727 Earthquake Related N=145 Non-Earthquake Related N=872 Total number of Inpatients seen since Jan 19th 19% of total patients seen were non-earthquake related

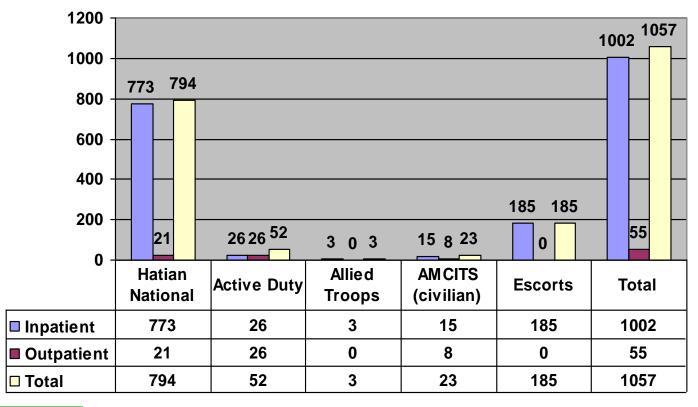


Total Admissions by Patient Type

0000 EST 19 Jan – 3 Mar 2010



Inpatient & Outpatient Total Admissions for Operation Unified Response Haiti

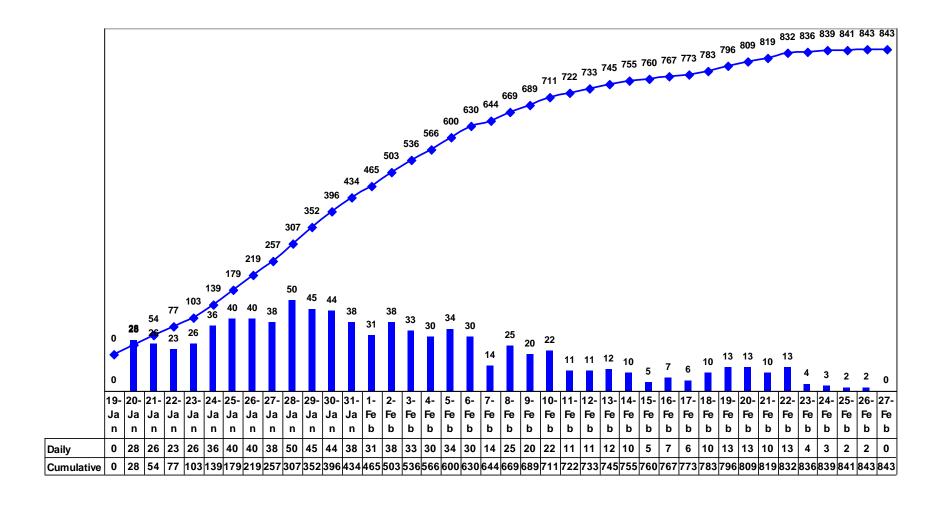


SURGERIES USNS COMFORT



0000 EST 19 Jan – 3 Mar 2010









Ancillary Services USNS Comfort Jan 20-28 Feb 2010



- Radiology Studies 3,896
 - Plain film x-rays 3,296
 - CT Scans 482
 - Ultrasound 118
- Laboratory Studies 4,257
- Prescriptions 70,286
 - Inpatient 64,840
 - Outpatient 5,446
- Physical Therapy 1,318
- Blood Products 376 transfused
 - Red Blood Cells 348
 - Plasma 16
 - Platelets 12



Transportation

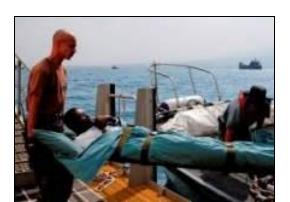


Air Ops

- 2 organic MH-60s completed 160 helo sorties (302.5 hours)
- Deck landing every 8 min during initial phase
 - 1251 patient transfers
 - 211 DV pax transfers
 - 166 medical staff transfers
 - 77 Air-evacuations
- Utilized NALO/CODs
- Coordination of international air assets

Boat Ops

- 593 boat missions.
 - 35 admissions and 446 discharges
- Seabee causeway at piers allowed patient discharges & transfers to Killick and Terminal Varreux



Ground Ops

- Used combination of COMFORT, USAID, and other units' vehicles to move patients and medical teams to land-based facilities
- Security teams required for all ground movements
- Dynamic schedule made it difficult to rely on centralized JTF-H assets



Utilized joint and inter-agency transportation model for patient and personnel movement



Accepting Medical Facilities- 16



TIVE COR. Y	_
Children of Promise**	1
Sacred Heart**	45
Partners in Health	14
Real Hope for Haiti	10
Love a Child	90
Killick	9
Terminal Varreux	360
St. Damien's Children's Hospital**	30
Heart Line	12
Angel Missions	10
Gheskio Hospital	1
PIH / Double Harvest**	4
Doctors without Borders	3
Canadian Field Hospital	3
St. Bonaface**	25
Aerovac	77

GoH / UN approved shore-based medical network provided placement of COMFORT patients for post-operative care



PATIENT TRANSFERS





Local Medical Facility Network Provided Continuum of Care of COMFORT Patients



Psychological and Spiritual Wellness



- SPRINT-Special Psychiatric Rapid Intervention Team
 - Provided psychological care to patients and caregivers
 - Facilitated transition assistance briefs for all personnel prior to re-deployment
- Chaplains had a strategic and operational impact to the mission
 - 3 Chaplains provided 24/7 spiritual support to patients and caregivers
 - Bereavement counseling for family members and "angel" escorts.
 - Hosted 1 month anniversary service w/ patients and escorts and memorial service upon departure





Supply Chain Management



Preparations

- From Reduced Operating Status to Full Operating Status within 3 days
- One-day load out prior to deployment to load
 - 380 pallets of medical supplies, MREs, relief supplies
 - -9 tractor trailer loads of food
- \$19M expended (4,000 line items requisitioned) for medical supplies and equipment



Sustainment

- Critical medical equipment and supply replenishment
 - -Portable X-Ray equipment
 - -Orthopedic hardware
 - -Fresh blood supply
 - Acinetobacter supplies and vaccines
- High priority cargo via NALO to GTMO and helo from VIN / BAT
- Limited use of PaP APOD due to security, cold chain, transportation challenges

Joint Operations

- Synchronized with JTF-H Joint Logistics Command, JFMCC/CTF 41, and Joint Logistics Hub/CTF 48
- Offloaded 117 pallets of donated medical supplies to USAIDsponsored distribution facility ashore
- Onloaded 120 pallets of EMF medical supplies and equipment for return to CONUS
 - Saved operating costs for three C-130 airlifts



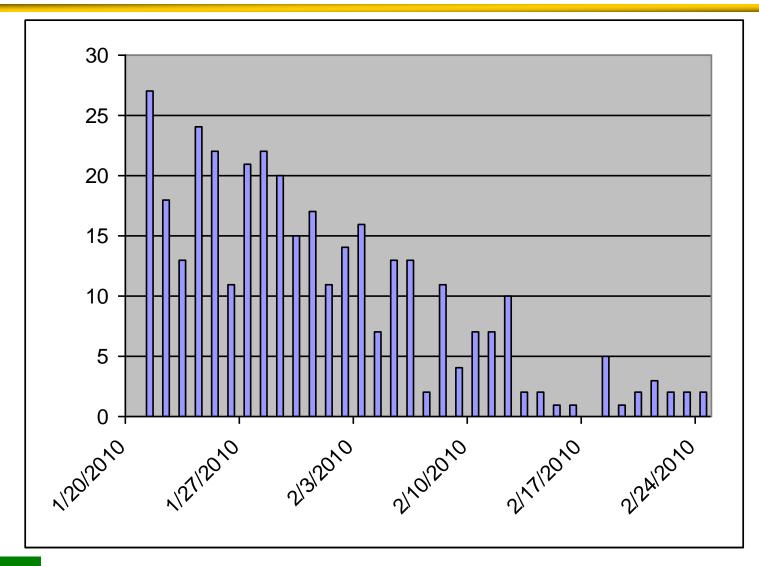




RED BLOOD CELL USAGE OPERATION UNIFIED RESPONSE 2010



(TOTAL = 348 UNITS)





BLOOD SUPPLY



- USNS COMFORT expended 52 units of Blood in first 2 ½ days of medical operations.
- Armed Services Blood Program Office Still in Process of Ramping Up Blood Supply Chain
 - Once Operational...They Were Superb!
- Critical Surgery Had to be Deferred Until Blood Supplies Could be Replenished. Baby Isabella Had to Wait to be Born Until Blood Arrived
 - Take Notice of Isabella in Both X-Ray and Bassinet...She Survived With No Amniotic Fluid to Protect Her For Over a Week!
 - Mom Survived as Well After Orthopedic Pelvic Surgery a Few Days Later
- GTMO Clinical Laboratory/Blood Bank a Critical Enabler in Providing Immediate Blood Supply Requirements
- Medical Logistics Urgently Coordinated Movement of Blood to Ship Within Six Hours Helping Save Both Isabella and Her Mom!







ORTHOPEDIC SUPPORT



- Encountered Horrendous Injuries and Incredible Volume of Orthopedic Patients. Not since WWII has Navy Medicine experienced so many orthopedic injuries in one location in a 30 day period.
- Required Immediate Augmentation Supplies, Equipment and Surgical Specialists
- Synthes Reps Invited and Transported to Ship to Facilitate Sophisticated Supply Order
- Three C-Arms & Four Mobile X-Rays Rapidly Procured Through GE & Delivered to Ship
- Staff Augmented with 20+ NGO Volunteer Orthopedic and Neurology Surgeons
- Medical Logistics "Air, Land, & Sea Adventure"
 Required to Obtain Critical Orthopedic Supplies
- For Six Weeks, The COMFORT was Most Advanced and Busiest Orthopedic Trauma Center in World









ACINETOBACTER (ACB) RESPONSE



- Encountered Highly Dangerous
 Acinetobacter Infection on Ship.
 Introduced by 2 separate index cases.
 - Contracted by approx 20+ Patients.
- Patients at High Risk of Death Due to Serious Wounds/Compromising Injuries
- Lack of Ship Space/Isolation Issues
 Could Easily Spread Deadly Epidemic
 To All Our Patients.
- Required Massive and Immediate Procurement of Gloves/Gowns/Masks and "Cold Chain" Antibiotics
- Medical Logistics Successfully Worked Issue To Expedite Critical Supplies to Ship Within 24 Hours
- ACB was Contained and Eventually Eliminated!









QUESTIONS?







C4I Internal & Ship to Shore COMMS



- 1. Secure shore based military communications (portable) PSC 117F
- 2. Web based EOC collaboration tools and supporting mobile satellite internet access terminals (BGAN/VSAT) for shore based use
 - Web EOC, PreviStar or county specific EOC collaborative website
- 3. VoIP/Local Emergency Response Radio Integration (WAVE/IPICS)
 - Military to civilian radio and Civilian to civilian radio communications.
 - Integrate shipboard communications systems with civilian emergency response personnel
- 4. Picocell Mobile cellular coverage
 - Utilize the T-AH platforms as a floating cell tower base station to provide cell coverage in the event that local infrastructure is damaged
- 5. Ship/Shore Host Nation Cellular Integration
 - PBX/Host Nation Cell Network integration for HCA and Foreign DR
- **6.** MTF Internal Communications Upgrades





T-AH C4I DSCA/Host Nation Cellular Integration

Operational Need

Objective: A. Disaster Response Stand alone Cellular System

B. Host nation cellular integration for HCA C. Telemedicine

<u>Value to Warfighter</u>: Enhanced disaster response and HCA interoperability between DoD, partner nations, NGO and HN

Gap or Sea Power Pillar: Lack of communication outside of military to military standard satellite communications.

Impact if not addressed: Limited communications with HN & partners due to absence of Civilian SATCOM, compromised cell infrastructure and inability to receive unsecure comms aboard



Proposed Solution

Technology: PICO cell system technology, Cellular

Integration Antenna, and *CBSP

<u>Similar/Related Projects</u>: Commercial Broadband Satellite Program and VSAT ashore for Telemedicine.

*FY10/11 CBSP installation aboard T-AH

<u>Technology Readiness Level</u>:

Major Goals/Schedule by Fiscal Year: FHD BOD endorsement to CFFC or NORTHCOM for approval and funding. Establishment of telemedicine Working Group to define T-AH requirement.

Business Case

Kev Metrics: Improved Communication

Proposed Funding (\$): Initial >\$100K

Partners: CFFC/NORTHCOM/BUMED

<u>Transition Sponsor</u>: COMSC

POC Info: CAPT James P. Rice, MC,

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